Inability to Void Protocol

Is patient able to void? — **Yes** → **Continue to monitor urinary output as ordered**

No ↓

Reassess within 4 hours

Prompt patient to void
If patient still unable to void, **Perform Bladder Scan**

Prompt patient to void
Provide privacy and allow patient to sit on toilet or toilet substitute (e.g. bedside commode, bedpan) for at least 15 minutes

Perform Bladder Scan
You may bladder scan a patient at any time for complaints of discomfort such as abdominal bloating or fullness

≥ 400 mL
Perform Intermittent catheterization

< 400 mL
Repeat bladder scan within 4 hrs if no void and follow protocol

May repeat bladder scan / intermittent cath sequence up to 3 consecutive times (3 in-out catheterizations)

3 consecutive Intermittent caths performed? — **No** / **Yes**

Notify Provider and discuss the following options:

Consider underlying causes of urinary retention:

- **Medications**: Anticholinergics, Antihistamines, Antidepressants, Opioids
- **Blockage:** Cystocele, Prostate, Strictures, Tumors, Bladder Stones
- **Infection**
- **Surgery:** Spinal, Orthopedic, Urologic
- **Neurological:** Spinal cord, Stroke, Parkinson's, MS
- **Constipation**
- **Diabetes**

Repeat Inability to Void Protocol? — **Yes**

Document in Epic Provider Notification:
- Repeat Inability to Void Protocol

Insert and discontinue catheter per Inability to Void Protocol? — **Yes**

- Discontinue Epic order for "Perform Bladder Scan/Intermittent Cath per Inability to Void Protocol"

- Place insert and discontinue orders using Epic order panel: "Insert and Discontinue Urinary Catheter per Inability to Void Protocol"

- Discontinue catheter in 2 or 3 days per Provider order and repeat bladder scan/intermittent cath sequence per Inability to Void Protocol.

NOTE: Do not remove catheters placed by Urologist

- Consider Urology consultation if patient fails 2nd voiding trial

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